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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
PATENT EXAMINING OPERATION

First Named Inventor: KRAMSKOY, Jeremy

Serial No: 09/996,169

Group Art Unit: 2126

Filed: November 28, 2001

Examiner: Meng Ai T. An

Att. Docket No.: E1083/20012

Confirmation No.: 2095

For: INTER-METHOD CONTROL TRANSFER FOR EXECUTED ENGINES WITH
MEMORY CONSTRAINTS

STATUS REQUEST LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Please advise us of the status of the above patent application and when we may expect to receive the first Office Action.

In this connection, attention is called to the fact that this application was filed November 28, 2001.

A duplicate copy of this letter along with a self-addressed stamped envelope is attached.

Respectfully submitted,

CAESAR, RIVISE, BERNSTEIN,
COHEN & FOKOTILOW, LTD.

By


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August 9, 2004

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/996,169	
	Filing Date	November 28, 2001	
	First Named Inventor	Jeremy Kramskoy	
	Art Unit	2126	
	Examiner Name	Meng Ai T. An	
Total Number of Pages in This Submission	3	Attorney Docket Number	E1083/20012

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form (in duplicate)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
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<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Caesar, Rivise, Bernstein, Cohen & Pokotilow, Ltd.; Customer No. 03000
Signature	
Date	August 9, 2004

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. [Transmitted to Facsimile No. (703) *]			
Typed or printed name	Scott M. Slomowitz		
Signature		Date	August 9, 2004

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